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PTO/SB/05 (08-00)

Approved for use through 10/31/2000. OMB 0651-0032  
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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

02486.0068.NPUS01

First Inventor

Cynthia B. Robinson

Title

COMBINATION OF DEHYDROEPIANDROSTERONE OR  
DEHYDROEPIANDROSTERONE-SULFATE WITH AN  
ANTICHOLINERGIC BRONCHODILATOR FOR TREATMENT  
ASTHMA OR CHRONIC OBSTRUCTIVE PULMONARY DISEASE

Express Mail

EL615430379US

2278 U.S. P.T.O.  
10/29/00



## APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

## ADDRESS TO:

Commissioner for Patents  
Mail Stop: Patent Application  
Alexandria, VA 22313-1450

1. ☒ Fee Transmittal Form (PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages **62** ]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross reference to Related Applications
  - Statement Regarding Fed Sponsored R & D
  - Reference to sequence listing, a table,  
or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets **15** ]
5. ☐ Oath or Declaration [Total Pages  ]
  - a. ☐ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for continuational divisional with Box 17 completed)
    - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s)  
named in the prior application, see 37 CFR  
1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or  
Computer Program (Appendix)
8. ☐ Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM or CD-R (2 copies); or
    - ii. ☐ paper
- c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of  
(when there is an assignee) Attorney
1. ☐ English Translation Document (if applicable)
2. ☐ Information disclosure ☐ Copies of IDS  
Statement (IDS)/PTO-1449 Citations
3. ☐ Preliminary Amendment
4. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
5. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
6. ☒ Other: Check for **\$385.00...**

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: /

Prior application information: Examiner Group I Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 18. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label **27194** or ☐ Correspondence address below

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Address	301 Ravenswood Avenue					
	Box 34					
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Country	USA	Telephone	(650) 463 8109	Fax	(650) 463 8400	

NAME (Print/Type)	Albert P. Halluin/Robin C. Chiang	Registration Nos.	25,227/46,619
Signature		Date	October 29, 2003

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**FEE TRANSMITTAL  
For FY 2003**


Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT****(\$385.00)****Complete if Known**

Application Number	Not Yet Assigned
Filing Date	October 29, 2003
First Named Inventor	Cynthia B. R binson
Examiner Name	Not Yet Assigned
Group Art Unit	Not Yet Assigned
Attorney Docket No.	02496.0068.NPUS01

METHOD OF PAYMENT					FEE CALCULATION (continued)																																																																																																																																																																																		
<b>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</b> Deposit Acct. No. <span style="border: 1px solid black; padding: 2px;">08-3038</span> Deposit Account Name <span style="border: 1px solid black; padding: 2px;">Howrey Simon Arnold &amp; White, LLP</span> <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					<b>3. ADDITIONAL FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee</th> <th>Entity Fee</th> <th>Small Fee</th> <th>Entity Fee</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td>_____</td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td>_____</td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td>_____</td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for ex parte reexamination</td><td>_____</td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td>_____</td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td>_____</td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td>_____</td></tr> <tr><td>116</td><td>420</td><td>216</td><td>210</td><td>Extension for reply within second month</td><td>_____</td></tr> <tr><td>117</td><td>950</td><td>217</td><td>475</td><td>Extension for reply within third month</td><td>_____</td></tr> <tr><td>118</td><td>1,480</td><td>218</td><td>740</td><td>Extension for reply within fourth month</td><td>_____</td></tr> <tr><td>128</td><td>2,010</td><td>228</td><td>1,005</td><td>Extension for reply within fifth month</td><td>_____</td></tr> <tr><td>119</td><td>330</td><td>219</td><td>165</td><td>Notice of Appeal</td><td>_____</td></tr> <tr><td>120</td><td>330</td><td>220</td><td>165</td><td>Filing a brief in support of an appeal</td><td>_____</td></tr> <tr><td>121</td><td>290</td><td>221</td><td>145</td><td>Request for oral hearing</td><td>_____</td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td>_____</td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - 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<b>2. <input checked="" type="checkbox"/> Payment Enclosed:</b> <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money <input type="checkbox"/> Other					<b>2. EXTRA CLAIM FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>18</td> <td>-20** = 0</td> <td>X</td> <td>= 0</td> </tr> <tr> <td>Independent Claims</td> <td>1 - 3** = 0</td> <td>X</td> <td>= 0</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td>= 0</td> </tr> </tbody> </table>					Total Claims	Extra Claims	Fee from below	Fee Paid	18	-20** = 0	X	= 0	Independent Claims	1 - 3** = 0	X	= 0	Multiple Dependent			= 0																																																																																																																																																														
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\*\*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Albert P. Halluin/Robin C. Chiang	Registration No. (Attorney/Agent)	25,227/46,619
Signature		Telephone	(650) 463 8109
		Date	October 29, 2003

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